

# Report on Medicare Compliance Volume 30, Number 41. November 15, 2021 List of Potential Risks: Developing Your Risk Assessment

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This is a list of the many potential risks facing health care organizations, said Kelly Sauders, a partner at Deloitte & Touche LLP. [1] In addition, there are risks stemming from the COVID-19 pandemic, including the supply chain, virtual care, potential fraud related to COVID-19 tests, security vulnerabilities in remote working and many other areas. Contact Sauders at <a href="mailto:ksauders@deloitte.com">ksauders@deloitte.com</a>.

# **Risk Considerations in Health Care for 2021**

- 1. Culture/Governance
  - a. Culture/Tone at the Top
  - b. Policies and Procedures
  - c. Roles and Responsibilities
  - d. Compliance Function
  - e. Board Oversight for Compliance
  - f. Board Effectiveness/Knowledge
  - g. Management
  - h. Executive Compensation/Performance Incentives/Alignment
- 2. Institutional Compliance Program
  - a. Code of Conduct.
  - b. Training and Education
  - c. Communication
  - d. Disciplinary Action
  - e. Policies and Procedures
  - f. Auditing and Monitoring
  - g. Response and Prevention
- 3. Departmental Compliance
  - a. Pharmacy

- b. Emergency Department (EMTALA)
- c. Wound Care
- d. Cancer Center
- e. Laboratory
- f. Radiology
- g. PT/OT/ST
- h. Operational Departments
- 4. Contract Management/Third-Party Risk
  - a. Physician Arrangements
  - b. Joint Ventures
  - c. Vendor Agreements
  - d. Contract Repository
  - e. Third-Party Vendor Management
- 5. Conflict of Interest
  - a. Board-Level
  - b. Executive Leadership and Management
  - c. Nonemployed Physicians
  - d. Foreign Support
- 6. Clinical Research
  - a. Research Compliance Program
  - b. Clinical Trials Billing
  - c. Human Subject Protection
  - d. Scientific Misconduct
  - e. Grant Management
  - f. Research Conflict of Interest
  - g. Institutional Review Board (IRB) Oversight
- 7. Quality/Performance Improvement
  - a. Patient Safety

- b. Medical Errors
- c. Patient Satisfaction
- d. Value-Based Care
- e. Quality Indicator Monitoring and Reporting
- f. Joint Commission Accreditation
- g. HACs and Readmissions
- h. Opioid-Related Monitoring
- i. Fraud, Waste, and Abuse Prevention

# 8. Hospital Coding and Billing

- a. Inpatient Coding ("compliance DRGs")
- b. Short Stays/Observation
- c. Computer-assisted Coding
- d. Admitting Privileges/Appropriate Admission Orders
- e. Outlier Payments/Payments > Charges

## 9. Professional Coding and Billing

- a. Training and Education
- b. Physician Documentation and Coding
- c. Auditing and Monitoring
- d. Computer-Assisted Coding
- e. Use of Scribes
- f. Incident-to, Split-Shared, etc.

#### 10. Privacy and Security

- a. Access and Permissions
- b. Physical and Device Security
- c. Privacy, Security, and Compliance
- d. Phishing, Ransomware, and Breach Response Readiness
- e. Risks with Automation, Artificial Intelligence
- f. System Acquisition/Implementation

#### 11. Materials Management/Procurement

- a. 340B Drug Pricing Program
- b. Retail Pharmacy Pricing
- c. Vendor Background Checks
- d. Vendor Vulnerability (Single-Source)
- e. Vendors with PHI Access/Business Associate Agreements

# 12. Specific Compliance/Regulatory Risks

- a. Recovery Audit Contractor Readiness
- b. Provider-Based Status
- c. Durable Medical Equipment
- d. Cost Reporting
- e. Stark & Anti-Kickback
- f. Medical Device Management
- g. Manufacturer Credits for Medical Devices
- h. Medical Necessity
- i. Sanctioned Providers
- j. HIPAA Privacy & Security
- k. Kickbacks
- l. Physician Arrangements/Contracting

#### 13. Alternate Payment Models/Delivery

- a. Accountable Care Organization Reporting
- b. Telehealth and Virtual Care Compliance
- c. Price Transparency
- d. Population Health

# 14. Other Programs/Services

- a. Inpatient Psychiatry
- b. IP Rehabilitation
- c. Ambulance Services

- d. SNF, Hospice, Home Health (Requirements for Certification/Payment)
- 15. Medical Education
  - a. Program Quality & Accreditation
  - b. Affiliation Management
  - c. Faculty Recruiting & Retention
- 16. Revenue Cycle
  - a. Scheduling/Verifications
  - b. Registration/Admitting
  - c. Charge Description Master (CDM)
  - d. Charge Capture
  - e. Patient Billing/Collections
  - f. A/R, Denials, Bad Debt
  - g. Credit Balances & Refunds
  - h. CMS PEPPER Monitoring
  - i. Payer Audits
  - j. In-House vs. Outsourced Functions

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